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09/21/2005

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/073,064	02/12/2002	Thomas Ciossek	038602-1324	4694

TITLE OF INVENTION: METHODS FOR DIAGNOSIS AND TREATMENT OF MDK1 SIGNAL TRANSDUCTION DISORDERS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1400		\$300	\$1700	12/21/2005		
EXAMINER		ART UNIT		CLASS-SU BCLASS]			
UNGAR, SUSAN NMN		1642		435-183000	-			
CFR 1.363). Change of correspon Address form PTO/SB/1 "Fee Address" indict PTO/SB/47; Rev 03-02 Number is required. ASSIGNEE NAME ANI	tion (or "Fee Address" Indic or more recent) attached. Us D RESIDENCE DATA TO E	Correspondence ation form e of a Customer BE PRINTED ON T	(1) the na or agents (2) the na registered 2 registered listed, no		a member a 2enes of up to no name is 3	ey & Lardner LLF		
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